



General Assembly

February Session, 2010

***Raised Bill No. 50***

LCO No. 256

\*00256\_\_\_\_\_INS\*

Referred to Committee on Insurance and Real Estate

Introduced by:  
(INS)

***AN ACT CONCERNING ORAL CHEMOTHERAPY TREATMENTS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 38a-504 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective January 1, 2011*):

3 (a) Each insurance company, hospital service corporation, medical  
4 service corporation, health care center or fraternal benefit society  
5 [which] that delivers, [or] or issues for delivery, renews, amends or  
6 continues in this state individual health insurance policies providing  
7 coverage of the type specified in subdivisions (1), (2), (4), (10), (11) and  
8 (12) of section 38a-469, shall provide coverage under such policies for  
9 the surgical removal of tumors and treatment of leukemia, including  
10 outpatient chemotherapy, reconstructive surgery, cost of any  
11 nondental prosthesis including any maxillo-facial prosthesis used to  
12 replace anatomic structures lost during treatment for head and neck  
13 tumors or additional appliances essential for the support of such  
14 prosthesis, outpatient chemotherapy following surgical procedure in  
15 connection with the treatment of tumors, and a wig if prescribed by a  
16 licensed oncologist for a patient who suffers hair loss as a result of

17 chemotherapy. Such benefits shall be subject to the same terms and  
18 conditions applicable to all other benefits under such policies.

19 (b) Except as provided in subsection (c) of this section, the coverage  
20 required by subsection (a) of this section shall provide at least a yearly  
21 benefit of five hundred dollars for the surgical removal of tumors, five  
22 hundred dollars for reconstructive surgery, five hundred dollars for  
23 outpatient chemotherapy, three hundred fifty dollars for a wig and  
24 three hundred dollars for a nondental prosthesis, except that for  
25 purposes of the surgical removal of breasts due to tumors the yearly  
26 benefit for such prosthesis shall be at least three hundred dollars for  
27 each breast removed.

28 (c) The coverage required by subsection (a) of this section shall  
29 provide benefits for the reasonable costs of reconstructive surgery on  
30 each breast on which a mastectomy has been performed, and  
31 reconstructive surgery on a nondiseased breast to produce a  
32 symmetrical appearance. Such benefits shall be subject to the same  
33 terms and conditions applicable to all other benefits under such  
34 policies. For the purposes of this subsection, reconstructive surgery  
35 includes, but is not limited to, augmentation mammoplasty, reduction  
36 mammoplasty and mastopexy.

37 (d) (1) Each policy of the type specified in subsection (a) of this  
38 section and in subdivision (13) of section 38a-469 that provides  
39 outpatient chemotherapy coverage shall provide coverage for orally-  
40 administered anticancer medications used to kill or slow the growth of  
41 cancerous cells that are prescribed by a prescribing practitioner, as  
42 defined in section 20-571.

43 (2) Such orally-administered anticancer medications shall be  
44 considered medical benefits under such policy and each such policy  
45 shall cover orally-administered anticancer medications on the same  
46 basis as intravenously administered or injected anticancer medications  
47 that are covered medical benefits.

48     (3) No such policy shall reclassify such anticancer medications,  
49     whether orally-administered, intravenously administered or injected,  
50     as other than medical benefits nor increase the coinsurance,  
51     copayment, deductible or other out-of-pocket expense imposed under  
52     such policy for such medications, to achieve compliance with this  
53     subsection.

54     Sec. 2. Section 38a-542 of the general statutes is repealed and the  
55     following is substituted in lieu thereof (*Effective January 1, 2011*):

56     (a) Each insurance company, hospital service corporation, medical  
57     service corporation, health care center or fraternal benefit society  
58     [which] that delivers, [or] issues for delivery, renews, amends or  
59     continues in this state group health insurance policies providing  
60     coverage of the type specified in subdivisions (1), (2), (4), (11) and (12)  
61     of section 38a-469 shall provide coverage under such policies for  
62     treatment of leukemia, including outpatient chemotherapy,  
63     reconstructive surgery, cost of any nondental prosthesis, including any  
64     maxillo-facial prosthesis used to replace anatomic structures lost  
65     during treatment for head and neck tumors or additional appliances  
66     essential for the support of such prosthesis, outpatient chemotherapy  
67     following surgical procedures in connection with the treatment of  
68     tumors, a wig if prescribed by a licensed oncologist for a patient who  
69     suffers hair loss as a result of chemotherapy, and costs of removal of  
70     any breast implant which was implanted on or before July 1, 1994,  
71     without regard to the purpose of such implantation, which removal is  
72     determined to be medically necessary. Such benefits shall be subject to  
73     the same terms and conditions applicable to all other benefits under  
74     such policies.

75     (b) Except as provided in subsection (c) of this section, the coverage  
76     required by subsection (a) of this section shall provide at least a yearly  
77     benefit of one thousand dollars for the costs of removal of any breast  
78     implant, five hundred dollars for the surgical removal of tumors, five  
79     hundred dollars for reconstructive surgery, five hundred dollars for

80 outpatient chemotherapy, three hundred fifty dollars for a wig and  
81 three hundred dollars for a nondental prosthesis, except that for  
82 purposes of the surgical removal of breasts due to tumors the yearly  
83 benefit for such prosthesis shall be at least three hundred dollars for  
84 each breast removed.

85 (c) The coverage required by subsection (a) of this section shall  
86 provide benefits for the reasonable costs of reconstructive surgery on  
87 each breast on which a mastectomy has been performed, and  
88 reconstructive surgery on a nondiseased breast to produce a  
89 symmetrical appearance. Such benefits shall be subject to the same  
90 terms and conditions applicable to all other benefits under such  
91 policies. For the purposes of this subsection, reconstructive surgery  
92 includes, but is not limited to, augmentation mammoplasty, reduction  
93 mammoplasty and mastopexy.

94 (d) (1) Each policy of the type specified in subsection (a) of this  
95 section and in subdivision (13) of section 38a-469 that provides  
96 outpatient chemotherapy coverage shall provide coverage for orally-  
97 administered anticancer medications used to kill or slow the growth of  
98 cancerous cells that are prescribed by a prescribing practitioner, as  
99 defined in section 20-571.

100 (2) Such orally-administered anticancer medications shall be  
101 considered medical benefits under such policy and each such policy  
102 shall cover orally-administered anticancer medications on the same  
103 basis as intravenously administered or injected anticancer medications  
104 that are covered medical benefits.

105 (3) No such policy shall reclassify such anticancer medications,  
106 whether orally-administered, intravenously administered or injected,  
107 as other than medical benefits nor increase the coinsurance,  
108 copayment, deductible or other out-of-pocket expense imposed under  
109 such policy for such medications, to achieve compliance with this  
110 subsection.

This act shall take effect as follows and shall amend the following sections:		
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Section 1	<i>January 1, 2011</i>	38a-504
Sec. 2	<i>January 1, 2011</i>	38a-542

***Statement of Purpose:***

To require orally-administered anticancer medications to be covered on the same basis as intravenously administered or injected anticancer medications.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*